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Never a Dull Moment in the Acute Care Area

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Working in the Acute Care Area (ACA) at Branch Health Clinic (BHC) Parris Island, S.C., which supports recruit training for the U.S. Marine Corps, is a rewarding yet challenging job for me. Marine Corps boot camp is 13 weeks of

physically grueling training. Every morning, I show up at 5:30 a.m. prepared to see just about anything from heat casualties and broken bones to soft tissue injuries and abrasions. I prepare for the unknown by checking oxygen tanks, making sure my personal work shelf is stocked with enough material to do any procedure a patient may require, and preparing our cool room for possible heat casualties, because they are a common occurrence around here. Needless to say, there is never a dull moment in the ACA.

As a member of the ACA crew, I am one of the first people to show up at the clinic each morning and one of the last to leave, sometimes as late as 7 p.m. Before we even begin seeing patients each day, every corpsman in the ACA has a collateral duty to do. My duty is ensuring the ambulance rig for our clinic is working properly and the supplies and equipment onboard are up to par and fully stocked. When it gets hot in the Lowcountry, a majority of the year, the ambulance gets called as often as three times a day and it has to be ready to go.

During the summer months, when temperatures in South Carolina soar into the high 90's or 100's with plenty of humidity, we see a lot of heat casualties. I've gotten very good at taking care of them and as soon as the patient reaches the door, I waste no time helping take control of them from either the ambulance crew or duty driver who brought them in. The patient is immediately dressed down to their PT gear and I reassess their temperature to make sure we aren't putting anyone in the cool tank who doesn't need to be there. If the patient's temperature is 102.5 degrees Fahrenheit or above, I begin by cooling them with ice cold sheets. I also start an I.V. to give the patient fluids and draw their blood for labs. Often, along with a heat injury, the patient has rhabdomyolysis, a breakdown of muscle fibers, or hyponatremia, a condition in which the body's cells aren't getting enough sodium. The labs will help determine if these conditions are present so the medical officer and I can treat them accordingly. As I've learned since working in the ACA, these conditions are common on Parris Island because, with the heat and constant physical activity, recruits are working their muscles hard and sweat is a daily occurrence.

Once the patient's temperature drops, I move them to a bed and start a head to toe physical assessment, checking the patient for any other illness or injury. I ask them about their

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medical history, allergies, and their current condition to help guide my examination. I then present my findings to the medical officer and together we come up with a treatment plan.

Pneumonia is another common ailment we see among recruits because of exposure to the elements during the winter months of training and close quarters with other recruits. When pneumonia is suspected after a physical exam, I'll immediately send the patient for a chest x-ray to confirm the diagnosis and determine the severity. Usually, the medical officer and I can treat the patient in the ACA with a nebulizer and oxygen. If the pneumonia is more serious than what we can treat in the ACA, we transport them to the Naval Hospital Beaufort Emergency Room where they'll get more comprehensive care.

For less critical patients, once they're checked in, they're assigned to a corpsman working in the main patient care area affectionately nicknamed "the pit." Working in the ACA, I get to be very hands-on with patients. Recruit training involves hand-to-hand combat training, maneuvering through obstacle courses, and many other physical activities, so I see a lot of superficial wounds, including deep lacerations. I also see patients with abscesses and skin infections including carbuncles, furuncles, and pilonidal cysts. These conditions can develop from ingrown hair and profuse sweating. Under the supervision of a doctor, I get to suture the lacerations and perform minor surgery procedures like incision and drainages.

At the end of the day, after making sure my last patient has received all necessary treatments and any medication they require, I'll get one more set of vitals on the patient to make sure everything is still normal. If all is well, I'll give the patient follow up instructions and wrap things up.

Working in the ACA at BHC Parris Island has put everything I've learned as a corpsman to the test, helped me sharpen my skills, and expanded my medical training.

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